

FIG. 1

1a COMMODITY SALES SYSTEM

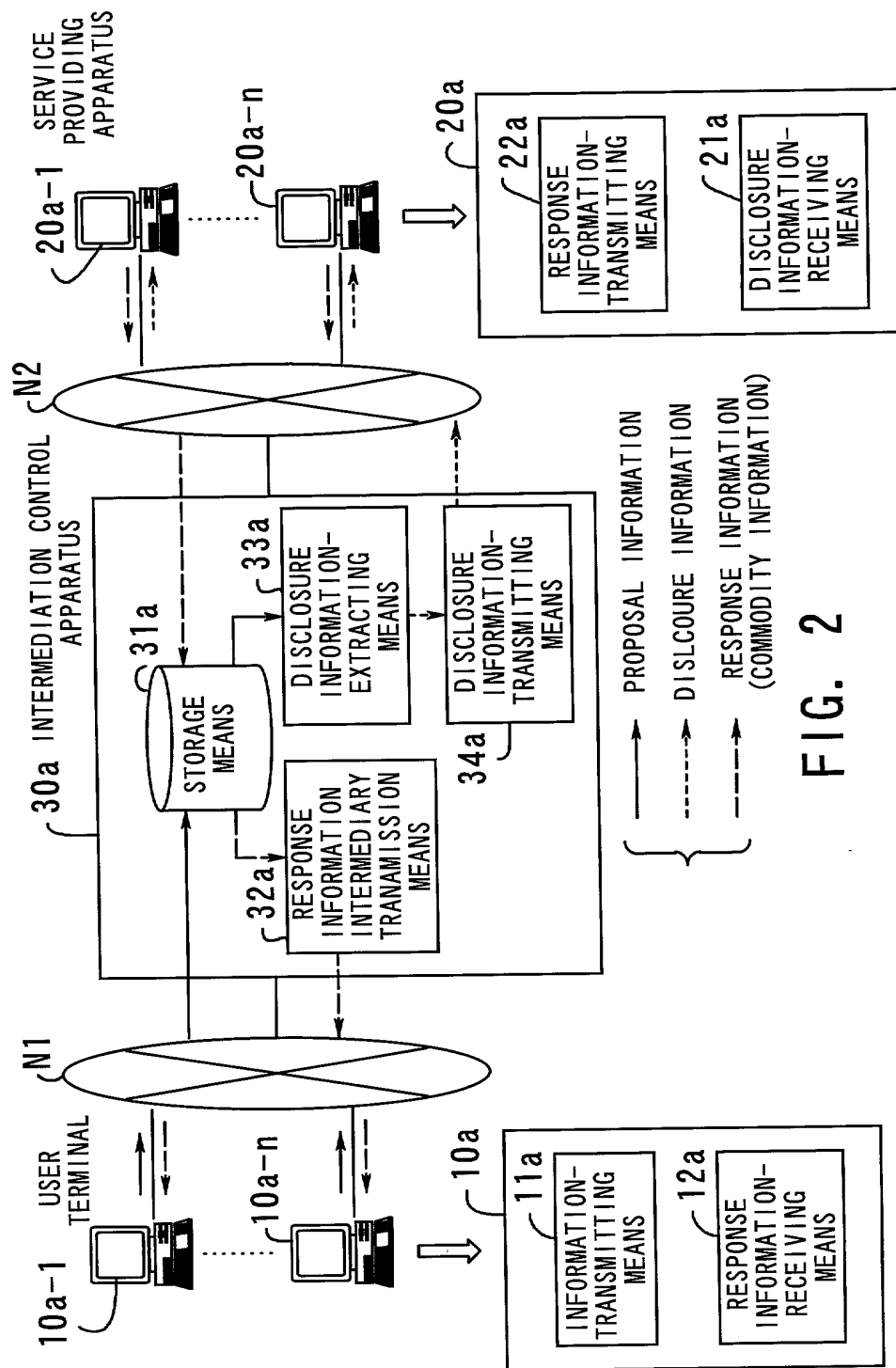


FIG. 2

110 PERSONAL DATA ENTRY SCREEN

111 PERSONAL DATA	
111a	USER ID ID000003
111b	PERSONAL NAME FUJI TARO
111c	AGE 38
111d	SEX MALE
111e	OCCUPATION PUBLIC OFFICIAL
111f	LENGTH OF SERVICE 20 YEARS
111g	ANNUAL INCOME 8 MILLION YEN
111h	WIFE OR HUSBAND EXISTS
	NUMBER OF CHILDREN 1
	AGE OF CHILD 14
	NUMBER OF DEPENDANDS OTHER THAN ABOVE 1
111i	CURRENTLY INSURED FAMILY PERSONEL ACCIDENT <input checked="" type="checkbox"/> MEDICAL <input type="checkbox"/>
111j	E-MAIL ADDRESS taro@hoken.mail.ne.jp

112 REGISTRATION

FIG. 3

120 ESTIMATE REQUEST DATA ENTRY SCREEN

121 ESTIMATE REQUEST DATA

USER ID	ID00003
PERSONAL NAME	FUJI TARO
REQUESTED INSURANCE	FAMILY PERSONAL ACCIDENT <input checked="" type="checkbox"/> MEDICAL <input type="checkbox"/> ...
OTHER DESIRED CONDITIONS	INSURED HOSPITAL EXPENSE ¥4000/DAY OR MORE INSURED OUTPATIENT EXPENSE ¥2500/DAY OR MORE SAVING TYPE DESIRED

122
REGISTRATION

FIG. 4

T1 DISCLOSURE INFORMATION EXTRACTION

T1a		T1b	
KIND OF INSURANCE	DISCLOSURE INFORMATION		
NURSING CARE EXPENSES INSURANCE	OCCUPATION		
	FAMILY MAKE-UP (INCLUDING AGE, CONDITION OF DISEASE)		
SAVINGS-TYPE INSURANCE	AGE		
	OCCUPATION		
	LENGTH OF SERVICE		
	ANNUAL INCOME		
LIFE INSURANCE	FAMILY MAKE-UP		
	AGE		
	OCCUPATION		
	ANNUAL INCOME		
	FAMILY MAKE-UP		
	:	:	:
	:	:	:

FIG. 5

210 PROPOSAL REQUEST RETRIEVAL SCREEN

211 INSURANCE TYPE SELECTION

INSURANCE TYPE SELECTION ▾

212 ANNUAL INCOME

6 0 0 万 ~ ▾

213 REGISTRATION DATA DESIGNATION

JANUARY 2000 OR LATER ▾

215

SEARCH

214 REGISTERED REQUEST LIST

REGISTRATION DATE	INSURANCE TYPE	ANNUAL INCOME	DETAILS OF INSURANCE
2000/01/22	MEDICAL SECURITY INSURANCE	6 MILLION	GROUP-TYPE WITH FAMILY RIDER
2000/01/23	MEDICAL SECURITY INSURANCE	8 MILLION	WITH ADVANCED SPECIAL CONTRACT
⋮	⋮	⋮	⋮

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DETAIL DISPLAY

FIG. 6

130 PRODUCT PROPOSAL RETRIEVAL SCREEN

131 REGISTRATION LIST

REGISTRATION DATE	INSURANCE TYPE	DETAILS OF INSURANCE
2000/01/23	MEDICAL SECURITY INSURANCE	GROUP-TYPE WITH FAMILY RISDER

133 SELECTION

132 INTRODUCTION LIST

DATE OF INTRODUCTION	INSURANCE COMPANY NAME	TITLE
2000/01/25	NEW JAPAN INSURANCE CO.LTD	PLEASE BE ADVISED.
2000/01/26	ABC MARINE FIRE INSURANCE	PLEASE BE ADVISED OF YOUR DESIRED PRODUCT
2000/01/27	WHITE INSURANCE CO.LTD	DEAR CUSTOMER.

134 DETAIL DISPLAY BUTTON

FIG. 7

140 INSURANCE PRODUCT ADVISE SCREEN

141 CUSTOMER ID000003	142 CUSTOMER REGISTRATION NUMBER 00000002	143 TITLE PLEASE BE ADVISED.
144 DETAILS OF INTRODUCTION		
<p>Dear Customer,</p> <p>We read details of your request. We have an insurance product plan which we wish to advise you by all means. So, we attach hereto a file of a literature of an insurance product, for your reference. Please consult the literature to decide your insurance.</p> <p>Sincerely yours,</p> <p>Mr. Ohi, Business Department New Japan Insurance Co. LTD</p> <p>TEL:03-XXX-0001 email:oi@nihonhoken.co.jp</p>		
145 ATTACHED FILE		
Literature for your reference		
		146 INTRODUCTION REGISTRATION

FIG. 8

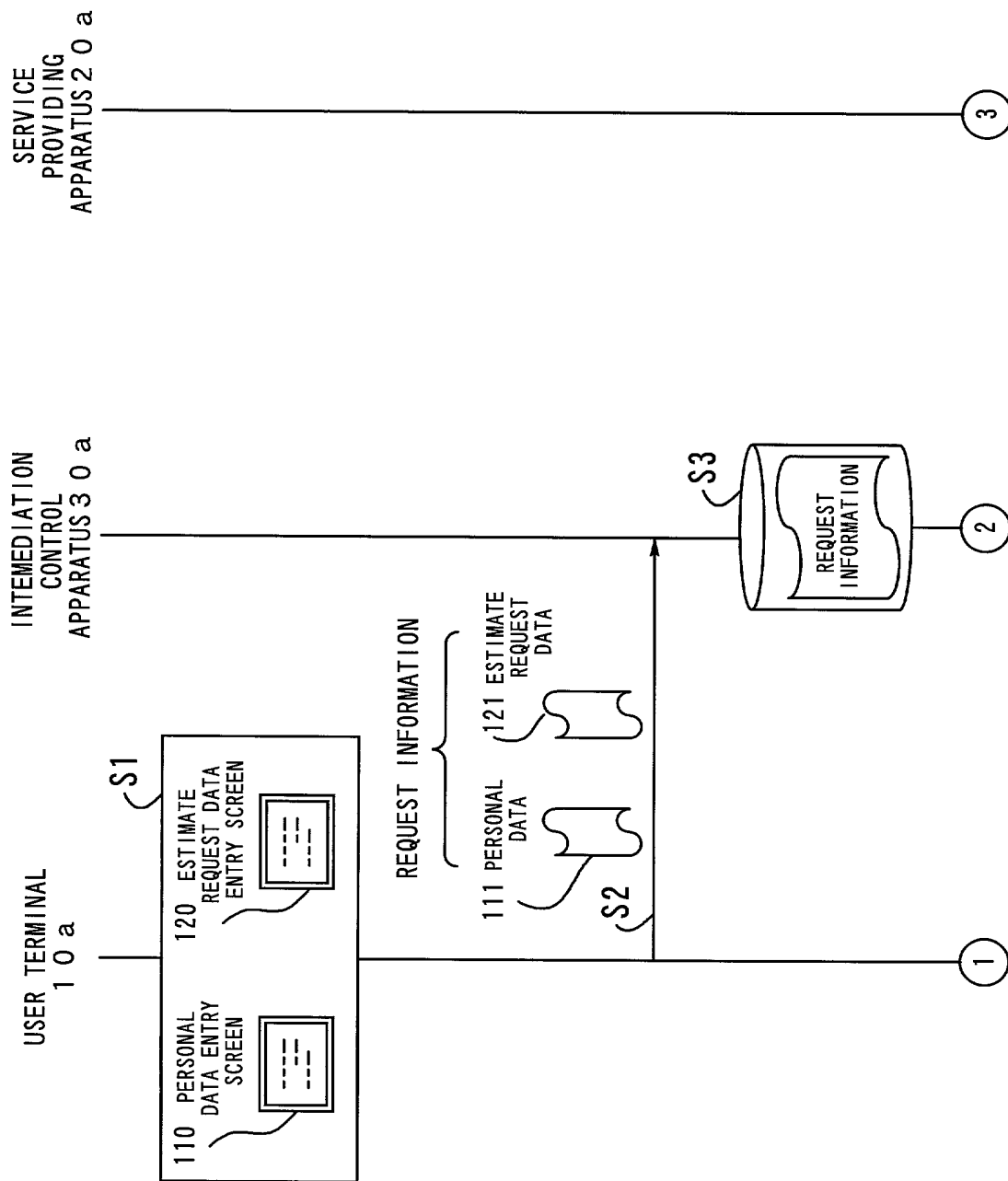


FIG. 9

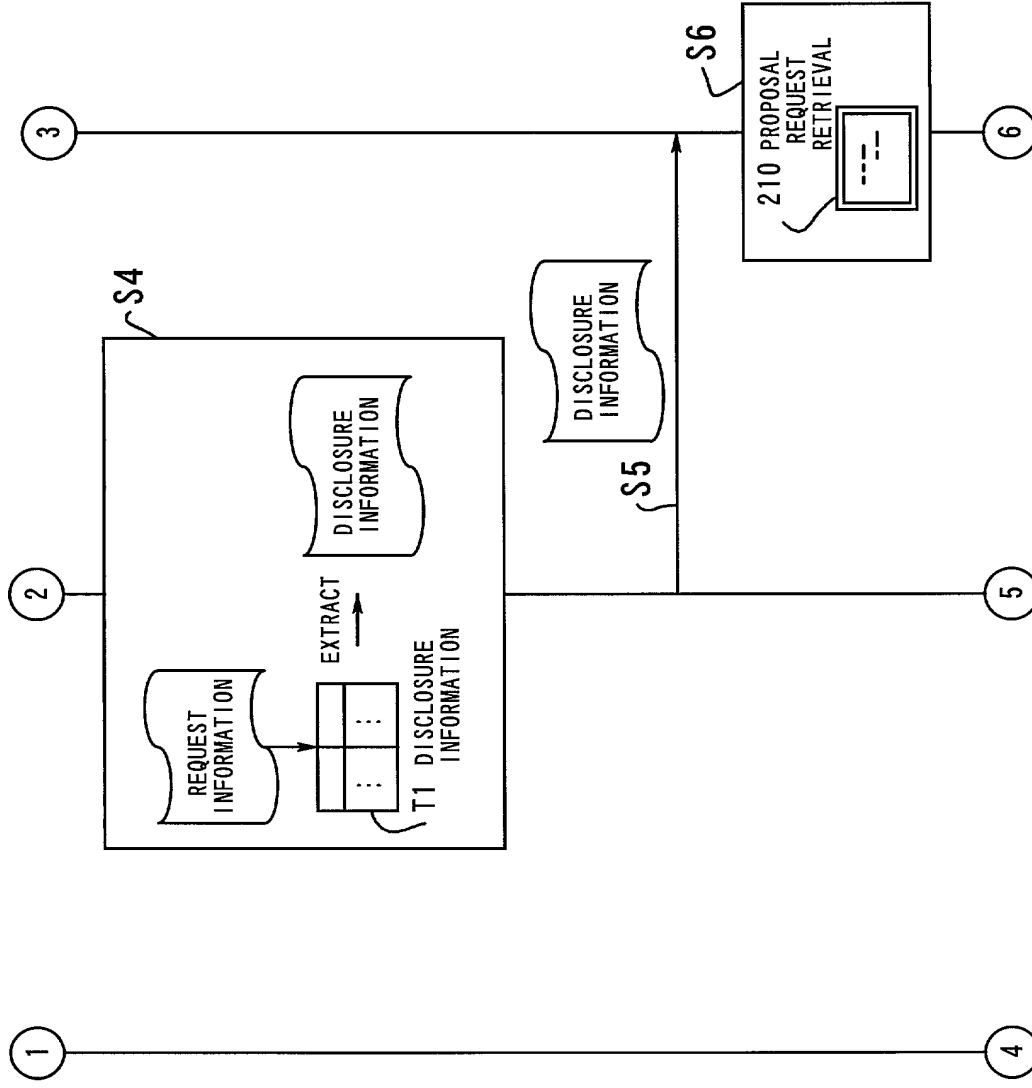


FIG. 10

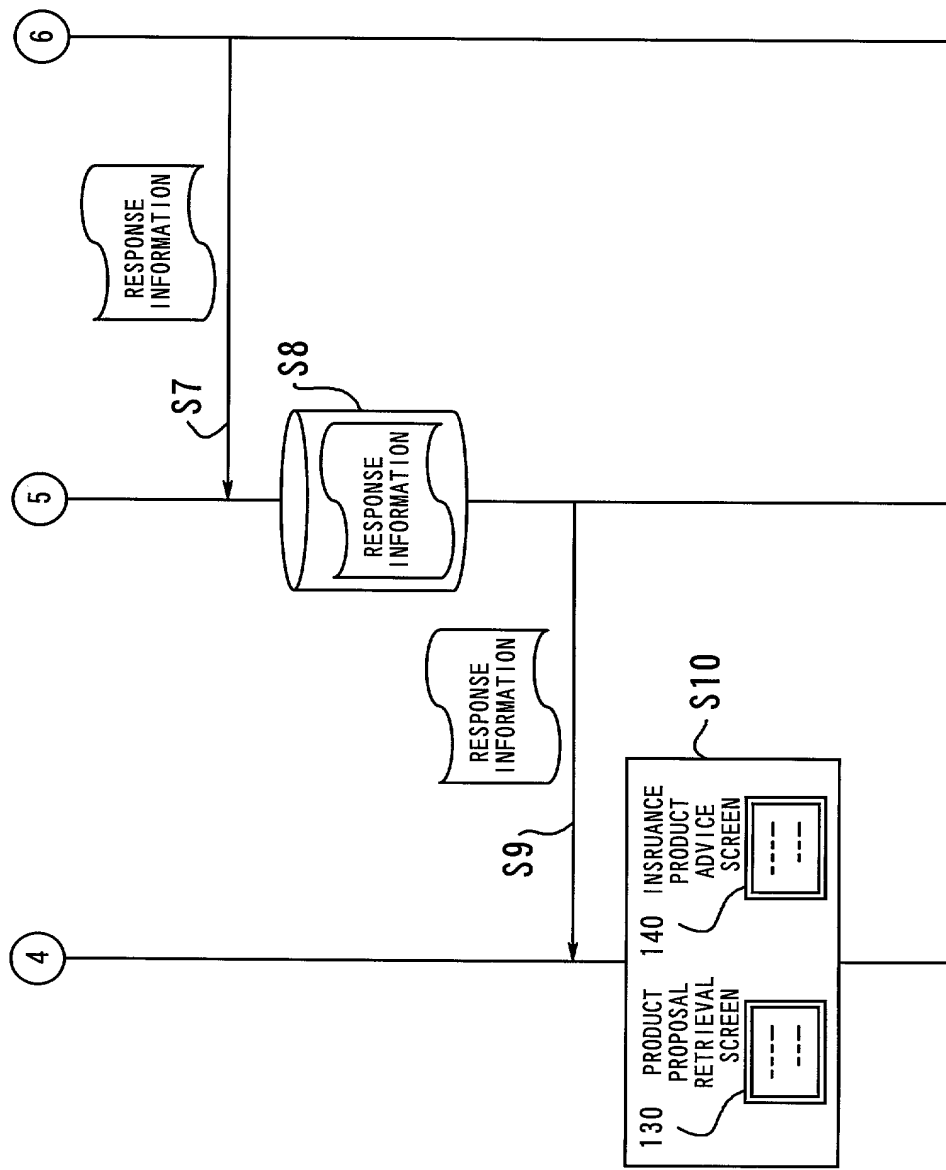


FIG. 11